PART B - FEE(S) TRANSMITTAL

Complete and send this formits ogether

h applicable fee(s), to: Mail Mail Stop ISS FEE

Commissioner for Patents P.O. Box 1450 ACTAL 2005



or Fax (571)-273-2885

MAY 3 1 2007

INSTRUCTIONS: The appropriate. All further indicated unless correct maintenance fee notifica	form should be used compromed including the state of the	for tran ng the l herwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new co	of ma orresp	ON FEE (if requi aintenance fees woondence address;	ired). E vill be a and/or	Blocks 1 through 5 s mailed to the current (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
23117 7590 03/06/2007 NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
									(Depositor's name)	
						· · · · · · · · · · · · · · · · · · ·			(Signature)	
						·			(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			R ATTORNEY DOCKET NO.			
10/508,870 12/10/2004 Alain Domard 3952-72 8468 FITLE OF INVENTION: SUPPORT COVERED WITH A CHITOSAN-BASED COATING AND METHOD FOR THE PRODUCTION THEREOF										
						211102101111	.21.10	zoonon mizado	•	
APPLN. TYPE	SMALL ENTITY	ISS	SUE FEE DUE	PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	NO \$1400		\$300	L	\$0		\$1700	06/06/2007	
EXAMINER ART UNIT			ART UNIT	CLASS-SUBCLASS	06/01/2007 DEMMANU2 00000085 10			0598870		
GRAY, JILL M 1774			1774	428-375000					1400.00 OP 300.00 OD	
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.				2. For printing on the patent from page: 18801 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO B	E PRINTED ON T	HE PATENT (print or	r type	·)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Ahlstrom Corporation Helsinki, Finland										
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔀 Corporation or other private group entity 🗀 Government										
4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Sale										
	tus (from status indicated s SMALL ENTITY statu		•	☐ b. Applicant is no	•					
NOTE: The Issue Fee and national statement as shown by the r	d Publication Fee (if requestroyed)	uired) w tes Pate	rill not be accepted	from anyone other tha					e assignee or other party in	
Authorized Signature	3 1h	V	~~			Date May	7 31	, 2007		
Typed or printed name	Bryan N.	Davio	lson			Registration N	o	30,251		
n application. Confident ubmitting the completed his form and/or suggestion	ation is required by 37 C iality is governed by 35 I application form to the ons for reducing this but irginia 22313,1450, DC	U.S.C. USPT(rden. sh	1. The information 122 and 37 CFR D. Time will vary ould be sent to the CEND FEES OF CO.	1.14. This collection is depending upon the in Chief Information Of	or retained or ret	ain a benefit by the nated to take 12 m lual case. Any could U.S. Patent and This appropriate the second se	ne publi ninutes mments Fradem	c which is to file (and to complete, including on the amount of tin ark Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O.	

this form and/or suggestions for re Box 1450, Alexandria, Virginia 22 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.